## FOR INSTRUCTIONS, SEE BACK OF FORM

# **DISCLOSURE SUMMARY PAGE**

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

2011 JAN 19 AM 10: 45

COMMITTEE NAME (Must be same as on Statement of Organize	ation)		$V_{\ell}$	UD W	Uto
Re-Elect Hart County Attorney	•		FO	RM	
IMPORTANT: Indicate by # type of committee you are reporting for: 5 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) Si (4) County Central Committee (5) County Candidate (6) City Candidate Subdivision Candidate (8) County PAC (9) City PAC (10) School Boar 11) Local Ballot Issue	(7) School Board or Other Politica	: (	(Rev.	<b>R-2</b> 12/2009) fice Use Onli	DISCLOSURE REPORT
CANDIDATE COMMITTEES ONLY: Candidate Name Peter C. Hart	Political Party (if applicable) Democratic	7 1	Logger Scann	ed SM	
Office Sought Palo Alto County Attorney	District (if Senate or House) Palo Alto County		Audite		
Late reports are subject to possible civil and criminal penalties. Pursua candidate's committee, and the chairperson, for any other type of committee.	nittee, is the individual responsible	(7) and 6 for filing	68A.40 timely	1(3), the can and accura	didate, for a te reports.
Peter C. Hast My	112-852-319	8.	1	-18-	2011
SIGNATURE OF PERSON FILING REPORT	TELEPHONE			DATÉ SI	GNED
I AM FILING A election	REPORT FOR (1) ELECTION		N-ELE	CTION YEA	AR.
(report date)	Indicate by	# []			
CHECK IF AMENDMENT TO REPORT DATED		Local Co	mmitte	es, enter Dat	e of Election
☑ Check if this is final (termination) report and attach Notice of Di (You must continue to file reports until a DR-3 is filed.)	ssolution Form DR-3.	Nov. 2: County & which El PaloA	Local ection i	Committees, s held	enter County in
STATEMENT OF CASH ON HAND		•			
CASH ON HAND at the beginning of the reporting period. (Total of committee. This amount MUST be the same as the cash of the last reporting period or must be zero if this is first r	on hand at the end		\$	3,018.58	
ADD TOTAL MONEY TAKEN IN THIS PERIOD					
Schedule A: Cash Contributions total (Attach Schedule	A) (*also see in-kind below)		_	150.00	
Schedule F: Loans Received total (Attach Schedule F).			_		
Schedule H: Total Sales of Campaign Property (Attach	Schedule H)		_		
(Schedule H applies to Candidates' Committe	ees Only) SUB-TOTAL		<b>.</b>	3,168.58	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD					
Schedule B: Expenditures total (Attach Schedule B) (**a	Iso see debts and loans below).		:	2,343.92	
Schedule F: Loan Repayments total (Attach Schedule F	•		_	824.66	
CASH ON HAND at the end of this reporting period (if final report	balance must be zero)		\$ <u>_</u>	0.00	
**UNPAID BILLS (From Schedule D - Attach Schedule D)			<b>3</b>	0.00	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule			_	0.00	
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F	•			0.00	
CONSULTANT BREAKDOWN (Schedule G Attached?)		_			NO
CANDIDATE COMMITTEES ONLY:			-		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach S	Schedule H)	9	3	0.00	

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

# For Instructions, See Back of Form CONTRIBUTIONS -- MONEY TAKEN IN (Including candidate's personal funds) COMMITTEE NAME (Must be same as on Statement of Organization) Reset Form Reset Form A (Rev. 07/03) CHECK THIS BOX IF AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

Re-Elect Hart County Attorney

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10-16-2010	ID# CK#	Dennis & Mary Ellen Schumacher, 4584 490th Ave., Mallard, Iowa	n.a.	\$10.00	
10-16-2010	ID# CK#	Ned Munn, 2404 5th St. Emmetsburg, Iowa	n.a.	\$20.00	
10-16-2010	ID# CK#	Myrna Heddinger, 2408 19th St. Emmetsburg, Iowa	n.a.	\$20.00	
10-26-2010	ID# CK#	Michael Wentzel, 1102 Broadway, Emmetsburg, Iowa	n.a.	\$50.00	
10-15-2010	ID#	Janet Barnes, 224 North Superior St. Emmetsburg, Iowa	n.a.	\$25.00	
10-15-2010	ID# CK#	Ruth Classen, 2405 21st Street, Emmetsburg, Iowa	n.a.	\$25.00	
	ID# CK#				
	ID# CK#				
	ID# CK#		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	ID# CK#				
<del></del>			SUB-TOTAL	<b>\$</b> \$150.00	

TOTAL (if last page of this schedule)

Page 1 of 1 (for Schedule A)

\$150.00

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Reset Form

## **EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF INDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

**Re-Elect Hart County Attorney** 

<u> </u>	04110104			
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-17-2010	ID# CK#103	Staples, Highway 71, Spencer, Iowa	envelopes, labels	\$ 200.33
10-21-2010	ID# CK# 104	Alco Duckwall, Highway 4 Emmetsburg, Iowa	tape	30.00
10-22-2010	ID# CK# 105	PaloAlto County Auditor 1010 Broadway, Emmetsburg, Iowa	plat book	\$10.00
10-22-2010	ID# CK# <sub>106</sub>	E-Pride Office Supply 918 Broadway, Emmetsburg, Ia.	labels	59.90
10-25-2010	ID# CK# <sub>107</sub>	United States Postal Service Emmetsburg, Iowa	postage	285.78
10-29-2010	ID# CK# <sub>108</sub>	United States Postal Service Emmetsburg, Iowa	postage	194.91
11-12-2010	ID# CK# <sub>109</sub>	The Print Shop 2111 Main Street, Emmetsburg, Iowa	flyers	797.15
11-13-2010	ID# CK# 110	West Bend Journal, Broadway West Bend, Iowa	meet and greet advertisement	32.40
			OUD TOTAL	

TOTAL (if last page of this schedule)

SUB-TOTAL \$ 16/0.47

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page	/	of 2
. age		UI

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

### **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE В MONETARY (Rev. 07/03) **EXPENDITURES CHECK THIS BOX IF** 

**AMENDING FORM** 

COMMITTEE NAME (Must be same as on Statement of Organization)

Re-Elect Hart County Attorney

		-		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11-13-2010	ID#	Sign a Rama 3368 100th St. Urbandale, Iowa 50322	yard signs	\$ 676.45
12-9-2010	ID# CK# 112	G.T. Enterprizes 102 East Robbins Street, Graettinger, Ia.	meet and greet advertisement	57.00
<del></del>	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
24.4.	ID#			
	CK#			
	ID#			
	CK#			
. <u></u>	ID#			
	CK#			
		<u> </u>	OUD TOTAL	\$ 722.45

SUB-TOTAL | \$ 733.45

TOTAL (if last page of this schedule)

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page of	Page	2	of	2	
---------	------	---	----	---	--

TE: This schedule	e reports money loaned to the committee which is deposited in th		(Rev. 02/08) LOANS RECEIVER
TE: This schedule  FAL UNPAID LOA  RT I - MONETAR	e reports money loaned to the committee which is deposited in th		
TAL UNPAID LOA			
TAL UNPAID LOA		le committee account	☐ CHECK THIS BOX
RTI- MONETAR	ANS FROM <u>LAST</u> REPORTING PERIOD \$		AMENDING FORM
(Original so	Y LOANS RECEIVED THIS REPORTING PERIOD		
( - · · <b>J</b> · · · - · ·	ource of loan, such as a bank, must be shown if a third party is in	volved. Include loans from can	didate's personal funds.)
DATE RECEIVED	NAME AND ADDRESS OF LENDER	RELATIONSHIP TO	
(MM/DD/YR)	(Include Endorser's Name, If Applicable)	CANDIDATE (If Applicab	le*)
	Peter C. Hart 2707 West Main Street Emmetsburg, Iowa		\$ 824.66
		TOTAL (PART I)	\$
	ARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD orgiven must be reported on Schedule E – In-kind Contributions.)		
DATE PAID	NAME AND ADDRESS OF LENDER	RELATIONSHIP TO	
(MM/DD/YR)	(Include Endorser's Name, If Applicable)	CANDIDATE* (If Applica	S
12-31-2010	Peter C. Hart 2707 West Main Street Emmetsburg, Iowa		824.66
l			
		ŀ	j <u> </u>
	TOTAL CASH	REPAYMENTS (PART II)	\$ <u>824.66</u>
	TOTAL CASH From Schedule E — TOTA		\$ <u>824.66</u> \$
		AL LOANS FORGIVEN	
	From Schedule E - TOTA	AL LOANS FORGIVEN  ND OF REPORT PERIOD  elative	\$